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PATENT TRADEMARK OFFICE

Attorney Docket 103.1064.01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Federwisch

Serial No. 09/823,238

Filed: 03/29/2001

For: Cascading Support for Mirrored  
Volumes

Art Unit: NYA

Examiner: NYA

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CERTIFICATE OF MAILING

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Assistant Commissioner for Patents  
Washington, D.C. 20231

on 9-13-01 by Arlette Malhas  
Date Arlette Malhas, Paralegal

**INFORMATION DISCLOSURE STATEMENT**

Honorable Assistant Commissioner  
for Patents  
Washington, D.C. 20231

Dear Sir:

This Information Disclosure Statement is submitted:

- ☒ under 37 CFR 1.97(b), or  
(Within three months of filing national application; or date of entry of international application; or before mailing date of first office action on the merits; whichever occurs last)
- ☐ under 37 CFR 1.97(c) together with either a:
  - ☐ Statement under 37 CFR 1.97(e) OR
  - ☐ a \$180.00 fee under 37 CFR 1.17(p)  
(After the CFR 1.97(b) time period, but before final action or notice of allowance, whichever occurs first)
- ☐ under 37 CFR 1.97(d) together with a:
  - ☐ Statement under 37 CFR 1.97(e) AND

☐ a \$180.00 petition fee set forth in 37 CFR 1.17(i)(1).  
(Filed after final action or notice of allowance, whichever occurs first, but before payment of the issue fee)

☒ Applicant(s) submit herewith Form PTO SB/08-Information Disclosure Statement by Applicant listing documents of which applicant(s) believe(s) might be material to the examination of this application and for which there might be a duty to disclose in accordance with 37 CFR 1.56.

☒ Applicant(s) submits herewith copies of documents listed in the attached Form PTO SB/08.

☐ Copies of documents listed in the attached Form PTO SB/08 were previously submitted in the following application:

Docket No.: \_\_\_\_\_  
Serial No.: \_\_\_\_\_  
Filed: \_\_\_\_\_

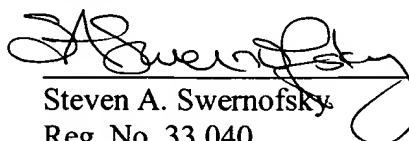
THE EXAMINER IS ENCOURAGED AND EXHORTED TO MAKE HIS OR HER OWN INDEPENDENT EVALUATION OF POSSIBLE RELEVANCE OF THE SUBMITTED DOCUMENTS.

At the present time, Applicant submits that the above documents, taken alone or in combination, neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

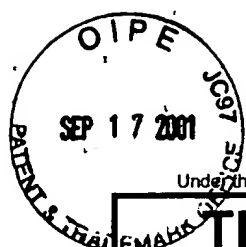
It is requested that the information disclosed herein be made of record in this application.

Date: 9/7/01

Respectfully submitted,

  
\_\_\_\_\_  
Steven A. Swernofsky  
Reg. No. 33,040

Swernofsky Law Group  
P.O. Box 390013  
Mountain View, CA 94039-0013  
(650) 947-0700



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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	09/823,238
		Filing Date	Mar 29, 2001
		First Named Inventor	Federwisch
		Group Art Unit	NYA
		Examiner Name	NYA
Total Number of Pages in This Submission	5+	Attorney Docket Number	103.1064.01

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ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO Form SB/08, 2 pgs. Copies of Art References Return Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Steven A. Swernofsky Reg. no. 33,040
Signature	
Date	9/7/01

CERTIFICATE OF MAILING			
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Type or printed name	Arlette Malhas, Paralegal		
Signature		Date	9-13-01

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